# JC20 Rec'd PCT/PTO 1 4 SEP 2005

# **Application Data Sheet**

**Application Information** 

Application Type::

Regular

Subject Matter::

Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD\_R?::

None

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

No

Computer Readable Form (CRF)?::

No

Title::

BENZENESULPHONAMIDE DERIVATIVES, METHOD

FOR PRODUCTION AND USE THEREOF FOR

TREATMENT OF PAIN

Attorney Docket Number::

11123.0101USWO

Request For Early Publication::

No

Request For Non-Publication::

No

Suggested Drawing Figure::

**Total Drawing Sheets::** 

0

Small Entity::

No

Latin Name::

Variety Denomination Name::

Petition Included::

No

Petition Type::

Licensed US Govt. Agency::

**Contract or Grant Numbers::** 

Secrecy Order in Parent Appl.?::

No

Initial

09/14/05

#### **Applicant Information**

Applicant Authority Type::

Inventor

**Primary Citizenship Country::** 

**FRANCE** 

Status::

**Full Capacity** 

Given Name::

Martine

Middle Name::

Family Name::

**BARTH** 

Name Suffix::

City of Residence::

Asnieres-les-Dijon

State or Province of Residence::

Country of Residence::

**FRANCE** 

Street of mailing address::

20 Rue Claude Deschault

City of mailing address::

Asnieres-les-Dijon

State or Province of mailing address::

Country of mailing address::

**FRANCE** 

Postal or Zip Code of mailing address:: F-21380

## **Applicant Information**

**Applicant Authority Type::** 

Inventor

Primary Citizenship Country::

FRANCE

Status::

**Full Capacity** 

Given Name::

Michel

Middle Name::

Family Name::

**BONDOUX** 

Name Suffix::

City of Residence::

Fontaine-les-Dijon

State or Province of Residence::

Country of Residence::

**FRANCE** 

Street of mailing address::

7 Rue Des Montereys

Initial

09/14/05

City of mailing address::

Fontaine-les-Dijon

State or Province of mailing address::

Country of mailing address::

**FRANCE** 

Postal or Zip Code of mailing address:: F-21121

**Applicant Information** 

**Applicant Authority Type::** 

Inventor

**Primary Citizenship Country::** 

FRANCE

Status::

**Full Capacity** 

Given Name::

Pierre

Middle Name::

Family Name::

DODEY

Name Suffix::

City of Residence::

Fontaine-les-Dijon

State or Province of Residence::

Country of Residence::

**FRANCE** 

Street of mailing address::

10 Rue des Champs d'Aloux

City of mailing address::

Fontaine-les-Dijon

State or Province of mailing address::

Country of mailing address::

**FRANCE** 

Postal or Zip Code of mailing address:: F-21121

**Applicant Information** 

Applicant Authority Type::

Inventor

**Primary Citizenship Country::** 

**FRANCE** 

Status::

**Full Capacity** 

Given Name::

Christine

Middle Name::

Family Name::

**MASSARDIER** 

Initial

09/14/05

Name Suffix::

City of Residence::

Dijon

State or Province of Residence::

Country of Residence::

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Street of mailing address::

5 Rue Nicolas Frochot

City of mailing address::

Dijon

State or Province of mailing address::

Country of mailing address::

**FRANCE** 

Postal or Zip Code of mailing address:: F-21000

**Applicant Information** 

**Applicant Authority Type:**:

Inventor

**Primary Citizenship Country::** 

**FRANCE** 

Status::

Full Capacity

Given Name::

Didier

Middle Name::

Family Name::

**THOMAS** 

Name Suffix::

City of Residence::

Saint-Apollinaire

State or Province of Residence::

Country of Residence::

**FRANCE** 

Street of mailing address::

22 Impasse du Vert Village

City of mailing address::

Saint-Apollinaire

State or Province of mailing address::

Country of mailing address::

**FRANCE** 

Postal or Zip Code of mailing address:: F-21850

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Applicant Authority Type::

Inventor

Primary Citizenship Country::

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Status::

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Given Name::

Jean-Michel

Middle Name::

Family Name::

LUCCARINI

Name Suffix::

City of Residence::

Dijon

State or Province of Residence::

Country of Residence::

**FRANCE** 

Street of mailing address::

9 Rue Cronstadt

City of mailing address::

Dijon

State or Province of mailing address::

Country of mailing address::

**FRANCE** 

Postal or Zip Code of mailing address:: F-21000

## **Correspondence Information**

Correspondence Customer Number::

23552

#### Representative Information

Representative Customer Number::	23552

#### **Domestic Priority Information**

Application::	Continuation Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/FR2004/000723	03/24/04

# Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	03 03602	03/25/03	Yes
FRANCE	03 04530	04/11/03	Yes

#### **Assignee Information**

Assignee Name::

Laboratoires Fournier S.A.

Street of mailing address::

42 Rue Longvic

City of mailing address::

Chenove

State or Province of mailing address::

Country of mailing address::

**FRANCE** 

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